

APPLICATION DATA SHEET

Application Information	
Application Number:	
Filing Date:	March 26, 2004
Application Type:	Regular
Subject Matter:	Utility
Suggested Classification:	
Suggested Group Art Unit:	
CD-ROM or CD-R:	
Number of CD disks:	
Number of Copies of Cds:	
Sequence Submission:	
Computer Readable Form (CRF):	
Number of Copies of CRF:	
Title:	CYTOTOXICITY MEDIATION OF CELLS EVIDENCING SURFACE EXPRESSION OF MCSP
Attorney Docket Number:	2056.036
Request for Early Publication:	
Request for Non-Publication:	
Suggested Drawing Figure:	
Total Drawing Sheets:	11 sheets (1 set black and white and 3 sets color)
Small Entity	Yes
Petition Included:	Yes
Petition Type:	Petition to Accept Color Drawings
Licensed US Govt. Agency:	
Contract or Grant Numbers:	
Secrecy Order in Parent Application:	

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Canada
Status:	Full Capacity
Given Name:	David
Middle Name:	S. F.
Family Name:	Young
Name Suffix:	
City of Residence:	Toronto
State or Province of Residence:	Ontario
Country of Residence:	Canada
Street of Mailing Address:	33 University Avenue, Suite 2407
City of Mailing Address:	Toronto
State or Province of Mailing Address:	Ontario
Country of Mailing Address:	Canada
Postal or Zip Code of Mailing Address:	M5J 2S7

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Canada
Status:	Full Capacity
Given Name:	Susan
Middle Name:	E.
Family Name:	Hahn
Name Suffix:	
City of Residence:	Toronto
State or Province of Residence:	Ontario
Country of Residence:	Canada
Street of Mailing Address:	9 Innisfree Court
City of Mailing Address:	Toronto
State or Province of Mailing Address:	Ontario
Country of Mailing Address:	Canada
Postal or Zip Code of Mailing Address:	M6P 3N7

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Canada
Status:	Full Capacity
Given Name:	Helen
Middle Name:	P.
Family Name:	Findlay
Name Suffix:	
City of Residence:	Toronto
State or Province of Residence:	Ontario
Country of Residence:	Canada
Street of Mailing Address:	205 Glendonwynne Road
City of Mailing Address:	Toronto
State or Province of Mailing Address:	Ontario
Country of Mailing Address:	Canada
Postal or Zip Code of Mailing Address:	M6P 3E9

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Canada
Status:	Full Capacity
Given Name:	Alison
Middle Name:	L.
Family Name:	Ferry
Name Suffix:	
City of Residence:	Toronto
State or Province of Residence:	Ontario
Country of Residence:	Canada
Street of Mailing Address:	342 Willard Avenue
City of Mailing Address:	Toronto
State or Province of Mailing Address:	Ontario
Country of Mailing Address:	Canada
Postal or Zip Code of Mailing Address:	M6S 3R2

Correspondence Information	
Correspondence Customer Number:	21917
Name:	McHALE & SLAVIN, P.A.
Street of Mailing Address:	2855 PGA Boulevard
City of Mailing Address:	Palm Beach Gardens
State or Province of Mailing Address:	Florida
Country of Mailing Address:	United States of America
Postal or Zip Code of Mailing Address:	33410-2910
Telephone:	(561) 625-6575
Facsimile:	(561) 625-6572
E-Mail Address:	palmbeach@m spatents.com

Representative Information		
Representative Customer No. 21917	Registration Number	Name

Domestic Priority Information			
Application	Continuity Type	Parent Application	Parent Filing Date
This application	Continuation-in-Part	10/762,129	01/20/2004
10/762,129	Continuation-in-Part	10/743,451	12/19/2003
10/743,451	Continuation	10/348,231	01/21/2003

Foreign Priority Information			
Country	Application Number	Filing Date	Priority Claimed

Assignee Information	
Assignee Name:	
Street of Mailing Address:	
City of Mailing Address:	
State or Province of Mailing Address:	
Country of Mailing Address:	
Postal or Zip Code of Mailing Address:	